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to renal or voiding dysfunctions, infections, or a combination of these. The following section provides descriptions of various levels of disability in each of these symptom areas. Where diagnostic codes refer the decisionmaker to these specific areas dysfunction, only the predominant area of dysfunction shall be considered for rating purposes. Since the areas of dysfunction described below do not cover all symptoms resulting from genitourinary diseases, specific diagnoses may include a description of symptoms assigned to that diagnosis.

	Rating
Renal dysfunction:	
Requiring regular dialysis, or precluding more than sedentary activity from one of the following: persistent edema and albuminuria; or, BUN more than 80mg%; or, creatinine more than 8mg%; or, markedly decreased function of kidney or other organ systems, especially cardiovascular	100
Persistent edema and albuminuria with BUN 40 to 80mg%; or, creatinine 4 to 8mg%; or, generalized poor health characterized by lethargy, weakness, anorexia, weight loss, or limitation of exertion	80
Constant albuminuria with some edema; or, definite decrease in kidney function; or, hypertension at least 40 percent disabling under diagnostic code 7101	60
Albumin constant or recurring with hyaline and granular casts or red blood cells; or, transient or slight edema or hypertension at least 10 percent disabling under diagnostic code 7101	30
Albumin and casts with history of acute nephritis; or, hypertension non-compensable under diagnostic code 7101	0
Voiding dysfunction:	
Rate particular condition as urine leakage, frequency, or obstructed voiding	
Continual Urine Leakage, Post Surgical Urinary Diversion, Urinary Incontinence, or Stress Incontinence:	
Requiring the use of an appliance or the wearing of absorbent materials which must be changed more than 4 times per day	60
Requiring the wearing of absorbent materials which must be changed 2 to 4 times per day	40
Requiring the wearing of absorbent materials which must be changed less than 2 times per day	20
Urinary frequency:	
Daytime voiding interval less than one hour, or; awakening to void five or more times per night	40
Daytime voiding interval between one and two hours, or; awakening to void three to four times per night	20
Daytime voiding interval between two and three hours, or; awakening to void two times per night	10
Obstructed voiding:	
Urinary retention requiring intermittent or continuous catheterization	30

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	Rating
Marked obstructive symptomatology (hesitancy, slow or weak stream, decreased force of stream) with any one or combination of the following:	
1. Post void residuals greater than 150 cc.	
2. Uroflowmetry; markedly diminished peak flow rate (less than 10 cc/sec).	
3. Recurrent urinary tract infections secondary to obstruction.	
4. Stricture disease requiring periodic dilatation every 2 to 3 months	10
Obstructive symptomatology with or without stricture disease requiring dilatation 1 to 2 times per year	0
Urinary tract infection:	
Poor renal function: Rate as renal dysfunction.	
Recurrent symptomatic infection requiring drainage/frequent hospitalization (greater than two times/year), and/or requiring continuous intensive management	30
Long-term drug therapy, 1-2 hospitalizations per year and/or requiring intermittent intensive management	10

[59 FR 2527, Jan. 18, 1994; 59 FR 10676, Mar. 7, 1994]

§ 4.115b Ratings of the genitourinary system—diagnoses.

	Rating
Note: When evaluating any claim involving loss or loss of use of one or more creative organs, refer to § 3.350 of this chapter to determine whether the veteran may be entitled to special monthly compensation. Footnotes in the schedule indicate conditions which potentially establish entitlement to special monthly compensation; however, there are other conditions in this section which under certain circumstances also establish entitlement to special monthly compensation.	
7500 Kidney, removal of one:	
Minimum evaluation	30
Or rate as renal dysfunction if there is nephritis, infection, or pathology of the other.	
7501 Kidney, abscess of:	
Rate as urinary tract infection	

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	Rating		Rating
7502 Nephritis, chronic: Rate as renal dysfunction.		Or rate as voiding dysfunction.	
7504 Pyelonephritis, chronic: Rate as renal dysfunction or urinary tract infection, whichever is predominant.		7522 Penis, deformity, with loss of erectile power—20 ¹ .	
7505 Kidney, tuberculosis of: Rate in accordance with §§ 4.88b or 4.89, whichever is appropriate.		7523 Testis, atrophy complete: Both—20 ¹ One—0 ¹	
7507 Nephrosclerosis, arteriolar: Rate according to predominant symptoms as renal dysfunction, hypertension or heart disease. If rated under the cardiovascular schedule, however, the percentage rating which would otherwise be assigned will be elevated to the next higher evaluation.		7524 Testis, removal: Both—30 ¹ One—0 ¹	
7508 Nephrolithiasis: Rate as hydronephrosis, <i>except for</i> recurrent stone formation requiring one or more of the following: 1. diet therapy 2. drug therapy 3. invasive or non-invasive procedures more than two times/year		Note: In cases of the removal of one testis as the result of a service-incurred injury or disease, other than an undescended or congenitally undeveloped testis, with the absence or nonfunctioning of the other testis unrelated to service, an evaluation of 30 percent will be assigned for the service-connected testicular loss. Testis, undescended, or congenitally undeveloped is not a ratable disability.	
7509 Hydronephrosis: Severe; Rate as renal dysfunction. Frequent attacks of colic with infection (pyonephrosis), kidney function impaired Frequent attacks of colic, requiring catheter drainage Only an occasional attack of colic, not infected and not requiring catheter drainage	30	7525 Epididymo-orchitis, chronic only: Rate as urinary tract infection. For tubercular infections: Rate in accordance with §§ 4.88b or 4.89, whichever is appropriate.	
7510 Ureterolithiasis: Rate as hydronephrosis, <i>except for</i> recurrent stone formation requiring one or more of the following: 1. diet therapy 2. drug therapy 3. invasive or non-invasive procedures more than two times/year	30	7527 Prostate gland injuries, infections, hypertrophy, postoperative residuals: Rate as voiding dysfunction or urinary tract infection, whichever is predominant.	
7511 Ureter, stricture of: Rate as hydronephrosis, <i>except for</i> recurrent stone formation requiring one or more of the following: 1. diet therapy 2. drug therapy 3. invasive or non-invasive procedures more than two times/year	20	7528 Malignant neoplasms of the genitourinary system	100
7512 Cystitis, chronic, includes interstitial and all etiologies, infectious and non-infectious: Rate as voiding dysfunction.	10	Note —Following the cessation of surgical, X-ray, antineoplastic chemotherapy or other therapeutic procedure, the rating of 100 percent shall continue with a mandatory VA examination at the expiration of six months. Any change in evaluation based upon that or any subsequent examination shall be subject to the provisions of § 3.105(e) of this chapter. If there has been no local recurrence or metastasis, rate on residuals as voiding dysfunction or renal dysfunction, whichever is predominant.	
7515 Bladder, calculus in, with symptoms interfering with function: Rate as voiding dysfunction	30	7529 Benign neoplasms of the genitourinary system: Rate as voiding dysfunction or renal dysfunction, whichever is predominant.	
7516 Bladder, fistula of: Rate as voiding dysfunction or urinary tract infection, whichever is predominant. Postoperative, suprapubic cystostomy ..	30	7530 Chronic renal disease requiring regular dialysis: Rate as renal dysfunction.	
7517 Bladder, injury of: Rate as voiding dysfunction.	100	7531 Kidney transplant: Following transplant surgery Thereafter: Rate on residuals as renal dysfunction, minimum rating	100 30
7518 Urethra, stricture of: Rate as voiding dysfunction.			
7519 Urethra, fistula of: Rate as voiding dysfunction. Multiple urethroperineal fistulae	100		
7520 Penis, removal of half or more	30		
7521 Penis removal of glans	20		

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	Rating
<p>Note—The 100 percent evaluation shall be assigned as of the date of hospital admission for transplant surgery and shall continue with a mandatory VA examination one year following hospital discharge. Any change in evaluation based upon that or any subsequent examination shall be subject to the provisions of § 3.105(e) of this chapter.</p> <p>7532 Renal tubular disorders (such as renal glycosurias, aminoacidurias, renal tubular acidosis, Fanconi's syndrome, Bartter's syndrome, related disorders of Henle's loop and proximal or distal nephron function, etc.):</p> <p>Minimum rating for symptomatic condition Or rate as renal dysfunction.</p> <p>7533 Cystic diseases of the kidneys (polycystic disease, uremic medullary cystic disease, Medullary sponge kidney, and similar conditions):</p> <p>Rate as renal dysfunction.</p> <p>7534 Atherosclerotic renal disease (renal artery stenosis or atheroembolic renal disease):</p> <p>Rate as renal dysfunction.</p> <p>7535 Toxic nephropathy (antibiotics, radiocontrast agents, nonsteroidal anti-inflammatory agents, heavy metals, and similar agents):</p> <p>Rate as renal dysfunction.</p> <p>7536 Glomerulonephritis:</p> <p>Rate as renal dysfunction.</p> <p>7537 Interstitial nephritis:</p> <p>Rate as renal dysfunction.</p> <p>7538 Papillary necrosis:</p> <p>Rate as renal dysfunction.</p> <p>7539 Renal amyloid disease:</p> <p>Rate as renal dysfunction.</p> <p>7540 Disseminated intravascular coagulation with renal cortical necrosis:</p> <p>Rate as renal dysfunction.</p> <p>7541 Renal involvement in diabetes mellitus, sickle cell anemia, systemic lupus erythematosus, vasculitis, or other systemic disease processes.</p> <p>Rate as renal dysfunction.</p> <p>7542 Neurogenic bladder:</p> <p>Rate as voiding dysfunction.</p>	20

¹ Review for entitlement to special monthly compensation under § 3.350 of this chapter.

[59 FR 2527, Jan. 18, 1994; 59 FR 14567, Mar. 29, 1994, as amended at 59 FR 46339, Sept. 8, 1994]

GYNECOLOGICAL CONDITIONS AND
DISORDERS OF THE BREAST

§4.116 Schedule of ratings—gynecological conditions and disorders of the breast.

	Rating
<p>Note 1: Natural menopause, primary amenorrhea, and pregnancy and childbirth are not disabilities for rating purposes. Chronic residuals of medical or surgical complications of pregnancy may be disabilities for rating purposes.</p> <p>Note 2: When evaluating any claim involving loss or loss of use of one or more creative organs or anatomical loss of one or both breasts, refer to § 3.350 of this chapter to determine whether the veteran may be entitled to special monthly compensation. Footnotes in the schedule indicate conditions which potentially establish entitlement to special monthly compensation; however, almost any condition in this section might, under certain circumstances, establish entitlement to special monthly compensation.</p> <p>7610 Vulva or clitoris, disease or injury of (including vulvovaginitis)</p> <p>7611 Vagina, disease or injury of.</p> <p>7612 Cervix, disease or injury of.</p> <p>7613 Uterus, disease, injury, or adhesions of.</p> <p>7614 Fallopian tube, disease, injury, or adhesions of (including pelvic inflammatory disease (PID)).</p> <p>7615 Ovary, disease, injury, or adhesions of.</p> <p>General Rating Formula for Disease, Injury, or Adhesions of Female Reproductive Organs (diagnostic codes 7610 through 7615):</p> <p>Symptoms not controlled by continuous treatment 30</p> <p>Symptoms that require continuous treatment 10</p> <p>Symptoms that do not require continuous treatment 0</p> <p>Note: For the purpose of VA disability evaluation, a disease, injury, or adhesions of the ovaries resulting in ovarian dysfunction affecting the menstrual cycle, such as dysmenorrhea and secondary amenorrhea, shall be rated under diagnostic code 7615</p> <p>7617 Uterus and both ovaries, removal of, complete:</p> <p>For three months after removal ¹ 100</p> <p>Thereafter ¹ 50</p> <p>7618 Uterus, removal of, including corpus:</p> <p>For three months after removal ¹ 100</p> <p>Thereafter ¹ 30</p> <p>7619 Ovary, removal of:</p> <p>For three months after removal ¹ 100</p> <p>Thereafter:</p> <p>Complete removal of both ovaries ¹ 30</p> <p>Removal of one with or without partial removal of the other ¹ 0</p> <p>Note: In cases of the removal of one ovary as the result of a service-connected injury or disease, with the absence or non-functioning of a second ovary unrelated to service, an evaluation of 30 percent will be assigned for the service-connected ovarian loss</p> <p>7620 Ovaries, atrophy of both, complete ¹ 20</p>	